From: NJLINCS Health Alert Network Sent: Monday, March 25, 2013 3:12 PM

Subject: Public Health Info: Protecting First Responders From Potential Measles Exposures

NJLINCS Health Alert Network
Public Health Info
Distributed by the New Jersey Department of Health

The New Jersey Department of Health (NJDOH), in conjunction with the Somerset County Department of Health and Bridgewater Township Health Department, continues to investigate measles exposures in New Jersey. We have received inquiries regarding precautions that should be taken by first responders when evaluating and transporting persons with suspected measles infection.

NJDOH recommends the following:

1. Vaccination

All healthcare personnel should have presumptive evidence of immunity to measles. This information should be documented and readily available. Presumptive evidence of immunity to measles for healthcare personnel includes the following:

- Written documentation of vaccination with 2 doses of live measles or measles-mumps-rubella (MMR) vaccine as follows:
- *First dose administered on or after first year birthday
- *Second dose administered at least 28 days after the first dose

OR

-Laboratory evidence of immunity or laboratory confirmation of disease

Please note that the majority of person born before 1957 are likely to have been infected naturally and may be presumed immune, depending on the circumstances. Unvaccinated healthcare personnel born before 1957 who lack laboratory evidence of measles immunity should be vaccinated with 2 doses of MMR vaccine at the appropriate interval. NJDOH recommends serologic testing of exposed healthcare personnel born before 1957 who do not have written documentation of 2 doses of measles-containing vaccine or laboratory evidence of immunity prior to the exposure.

2. Protective Equipment and Procedures

All healthcare personnel should use standard precautions during all patient encounters. Measles is a highly contagious viral infection spread via the airborne route. In order to minimize risk, NJDOH recommends the following:

- First responders should wear particulate respirators (e.g., N-95). Please note that particulate respirators should only be used as part of a comprehensive respiratory protection program that includes appropriate screening, training and fit-testing.

AND

- Patients should wear a surgical mask, if not medically contraindicated

- 3. Notification to receiving facility
- Receiving facilities must be notified PRIOR to arrival of known or suspected measles patients to facilitate implementation of appropriate infection prevention procedures. In healthcare settings, patients with suspected measles should be placed immediately in an airborne infection (negative-pressure) isolation room if one is available and, if possible, should not be sent to other parts of the hospital for examination or testing purposes.

4. Transportation

- Because measles virus can survive on infected surfaces or hang in the air for up to two hours, ambulances and transport vehicles should be taken out of service for a minimum of two hours after transport of a patient with known or suspected measles.
- 5. Report and Evaluation of Exposure
- First responders, who are potentially exposed to measles, should consult with healthcare and public health professionals.
- Hospital personnel should evaluate risk and recommend and/or provide appropriate prophylactic care when indicated (i.e., One dose of MMR within 72 hours of exposure for first responders with no proof of immunity).
- Personnel who have transported a suspected measles patient and develop measles-like symptoms, including fever, rash, runny nose, cough, loss of appetite, and "pink eye", should seek medical attention (with appropriate infection control precautions). All suspected cases of measles must be reported immediately to the local health department responsible for the municipality in which the patient resides.

6. Resources

- Protecting Emergency Medical Service Workers from Airborne Infectious Diseases: http://www.nj.gov/health/peosh/documents/emsguide.pdf
- 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings: http://www.cdc.gov/ncidod/dhqp/pdf/isolation2007.pdf
- Immunization of Health-Care Personnel: http://www.cdc.gov/mmwr/pdf/rr/rr6007.pdf
- New Jersey specific Measles Frequently Asked Questions pertaining to clinical staff and the general public: www.nj.gov/health under the "Hot Topics" section
- Centers for Disease Control and Prevention general measles information: http://www.cdc.gov/measles/index.html

This information has been distributed to: DHSS Senior Staff; DHSS Staff; LINCS Coordinator Backups; LINCS Coordinators; LINCS Epidemiologists; LINCS Health Educators; LINCS Health Officer Assistants; LINCS Health Officers; LINCS Health Planners; LINCS Partnership Coordinators; LINCS Public Health Nurses; LINCS Regional Health Planners; LINCS Team Members; LOCAL Health Officers; LOCAL Public Health; Blood Banks; Emergency Medical Services Organizations; Health Care Organizations; Hospitals / Veterans; Occupational Health Organizations; Public Health Associations; Public Health Council

Further distribution of this message should be directed to: Day Care Centers / Preschools; Educational Institutions; Community Health Centers (FQHCs); Emergency Medical Services / First Responders; Health Care Facilities / Other; Health Care Providers; Hospital CEOs; Hospital Emerg Preparedness Coords; Hospital ER Medical Directors; Hospital Infection Control Practitioners; Hospital Medical Directors; Hospital Nursing Directors; Hospital Security Directors; Hospitals / Other; Labs / Non-Sentinel; Labs / Sentinel; Local Boards of Health; and other partners in your region, as appropriate.